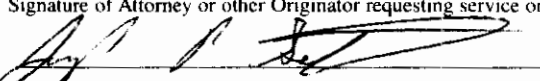


U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

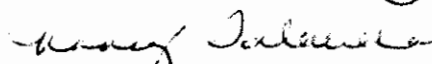
PLAINTIFF <u>Joseph P. Schmitt</u>		COURT CASE NUMBER <u>05-10573-RWZ</u>	
DEFENDANT <u>David Nolan</u>		TYPE OF PROCESS <u>Civil Rights Action</u>	
SERVE ➔ AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <u>David Nolan</u>		
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) <u>MCI-Cedar Junction Waipole, Massachusetts</u>		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:			
<div style="border: 1px solid black; padding: 5px;"> <u>Joseph P. Schmitt</u> <u>30 Administration Road</u> <u>Bridgewater, Massachusetts</u> <u>02324-3230</u> </div>		Number of process to be served with this Form - 285	
		Number of parties to be served in this case	<u>10</u>
		Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):
Fold

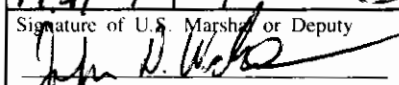
If this person is not available at the above address then serve this complaint to MA. Department of Correction Legal Division at 70 Franklin Street, Suite 600, Boston Massachusetts

Signature of Attorney or other Originator requesting service on behalf of: 	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER <u>781-326-1111</u>	DATE <u>4/21/06</u>
---	---	---	------------------------

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process <u>1</u>	District of Origin No. <u>38</u>	District to Serve No. <u>38</u>	Signature of Authorized USMS Deputy or Clerk 	Date <u>5/9/06</u>
---	---------------------------	-------------------------------------	------------------------------------	--	-----------------------

I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)				<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.	
Address (complete only if different than shown above) <u>As shown served @ MA DOC HQ</u> <u>50 Maple St</u> <u>Milford, MA 01757</u>				Date of Service <u>11/3/07</u>	Time <u>1410</u> <u>pm</u>
				Signature of U.S. Marshal or Deputy 	
Service Fee <u>45</u>	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges <u>45</u>	Advance Deposits	Amount owed to U.S. Marshal or Amount of Refund

REMARKS:

1 Dism; 1 hr; 25 miles

UNITED STATES DISTRICT COURT

District of MASSACHUSETTS

JOSEPH P. SCHMITT

V.

SUMMONS IN A CIVIL CASE

MASS. DEPT. OF CORRECTIONS, et al.

CASE NUMBER: 05-10573-RWZ

TO: (Name and address of Defendant)

David Nolan MCI-Cedar Junction
Walpole, Massachusetts

YOU ARE HEREBY SUMMONED and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

Joseph P. Schmitt
30 Administration Road
Bridgewater, Massachusetts
02324-3230

an answer to the complaint which is herewith served upon you, within 20 days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

Sarah Allison Thornton
CLERK

(By) DEPUTY CLERK



DATE

4/19/06